

LYDD TOWN COUNCIL

APPLICATION FOR A GRANT (VOLUNTARY ORGANISATIONS)

Please note that this application will not be considered unless it is accompanied by a copy of the organisation's latest set of accounts showing income and expenditure and balances. If the organisation does not prepare annual accounts or is less than 12 months' old copies of statements for all accounts (bank/deposit/investment and so on) covering the last six months must be supplied.

Please note that due to a large number of applications in recent years the maximum Amount considered will be for £500.

1	Name of organisation	
2	Is the organisation a registered charity? If yes, please state charity number If no, what is the constituted status of your organisation?	
3	Name, address and status of individual ('the contact') completing this application	
4	Contact's telephone no.	
5	Contact's email address	
6	Amount of grant requested	
7	For what purpose or project is the grant requested?	
8	What will be the total cost of the project?	
9	If the total cost of the project is more than the grant requested, how will the remainder be financed?	
10	Have you actually applied for a grant towards this project from other organisations? If so, which organisations, how	

	much, and has funding been confirmed?	
11	How many signatories are required to sign cheques? <i>(must be a minimum of two)</i> Please provide full details of who the cheque should be made payable to.	
12	Who/What will benefit from this project and how?	
13	When will the project be completed?	
14	Please provide the name of your bank account to whom cheques should be made payable	
15	Monitoring of funding Please supply invoices to show that the money has been spent in accordance with the grant within 1 month of completion of project or spending.	Monitoring of funding – please print your name and sign to confirm that invoices will be provided to Lydd Town Council for the items funded. Name Signature Date

If necessary, please continue on a separate sheet. Please feel free to submit any other relevant supporting information.

Signed _____ Date _____
(The person completing this application on the organisation's behalf)

Please return to: The Town Clerk, Lydd Town Council, Guild Hall, 13 High Street, Lydd, TN29 9AF
Email: townclerk@lyddtowncouncil.gov.uk